i. National Leprosy Eradication Programme:—

The prevalence of Leprosy has reduced from 5.43/1000 in 1991 to 0.89/1000 population in 1996.

ii. National AIDS Control Programme:—

The implementation of this Programme has not been found satisfactory.

iii. Revised National Tuberculosis Programme being pilot tested in Vaishali District of Bihar:—

As against the average cure rate of below 40% , the cure rate in Vaishali District has been 66.6%.

An externally Funded Project Cell has been set up in the Ministry to monitor the effective implementation of these projects.

'AIDS Awareness Programme' in Andhra Pradesh

1123. SHRI YERRA NARAYANASWAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what is the status of the "AIDS Awareness Programme";

(b) whether any mass awareness programme has been initiated in Andhra Pradesh; and

(c) if so, details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) There being no proven medicine or vaccine against HIV/AIDS, the only alternative to tackle the spread of this infection is through creating mass awareness about it. Therefore, one of the important strategies of the national AIDS Control Programme is to create awareness amongst masses specially high risk behaviour groups about HIV/AIDS. This is done through all media of communication like Press, Radio, T.V., Field Publicity and inter-personal communication channels. Students in Colleges and Universities have been involved in the Programme through a scheme — 'University Talk AIDS' being implemented by the Deptt. of Youth Affairs. A prevention Indicators Survey conducted in five States during 1996 revealed that the awareness level in adult urban population ranged between 66% to 90% and in rural areas between 20% to 70%.

(b) and (c) The Government of Andhra Pradesh are implementing AIDS Awareness Programme using electronic media, print materials, outdoor publicity channels like hoarding, wall paintings, display boards, but panels, and inter-personal communication and councelling. A training programme for doctors and para-medical workers is being implemented. About 27 N.G.Os are supported by the State Government to undertake AIDS Awareness activities as also implement targetted intervention projects for the "high risk groups".

Failure on the Part of Government to Develop and Sustain a Medical System for Early Detection of Serious Disease

1124. SHRI YERRA NARAYANASWAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news item which appeared in The Statesman dated 12th February, 1997, captioned "Health sat up unable to ensure early detection";

(b) whether it is a fact that Government have been unable to develop and sustain a medical system for early detection of serious diseases;

(c) if so, what are the reasons for the failure; and

(d) what steps will be taken to improve the system to foster early detection of serious and life impairing diseases?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) Yes, Sir.

(b) to (d) During the successive Plan periods, the Government has initiated several national Health and Family Welfare Programmes for Primary prevention, early case detection and prompt treatment of diseases.

Training programmes for medical and para-medical personnel to improve their capabilities in the early detection of diseases are operational.